

PRESIDENT : We will adjourn now and reassemble at half past three.

The Council rose for lunch at 3 P. M. and reassembled at 3-30 P. M.

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): Sir, I have to place before you certain important points about the attack of cholera in South Travancore. Before stating the facts I have to bring to your notice the fact that there are incorrect and unreliable statements issued in the last Gazette, in Bulletin No. 1, regarding the actual number of deaths as well as attacks. I know that there are practical difficulties in the way of getting the true numbers, especially when the rules stand as they are. In this connection I will strongly request the Government to treat cholera unlike their treatment of cholera at present. Sir, it is thousand times more dangerous and serious than plague so far as this State is concerned, especially so far as South Travancore is concerned. You know very well that South Travancore is oftentimes met with failure of crops, and want of drinking water. The Chief Engineer in his tour last time visited a well in which there was not even half a bucketful of water which was being distributed by three or four girls who remained there for half to one hour. The scarcity of water, want of proper food due to their poverty and the insufficiency of food—all these are the most important factors which we meet very often in the most dangerous epidemic cholera affected area. In this connection I said that Government will have to exercise better control over the cholera affected areas simply because it is more dangerous than plague. We know that the Government spend a lot of money when a rat or something dies in a distant place. True, that is one thousand times more dangerous to the destruction of humanity. Still, so far as Travancore is concerned, unfortunately we are cursed not with plague but with this deplorable and cursed devil, this cholera. So, I simply want to place before the Government this fact. There should be rules framed with more details. Now there is a responsibility thrown on the Tahsildar to immediately report the matter to the Sanitary Commissioner. The Tahsildar gets the report only from the Proverthikar who will not be living in the particular pakuthi affected by the epidemic. So, you know that there is not any necessity for me to place these details before you. I have just explained to the Inspecting Medical Officer every detail of the thing and the practical difficulty. And even though the Government want to do anything for the benefit of the public, so far as the public are really concerned, they do not get the benefit of the funds spent. So, I stress this point that as far as possible the statistics should be nearer the actuals and hereafter the Government should see that the casualties are all noted. The actual number as seen from the Bulletin No. 1 is 3183, but I shall narrate one instance where in a fishermen's village the Catholic Father asked his Kanakkan simply to level down the country. There the grave yard was something like a *Maracheeni Vilai*. The number of deaths there was very great. But the Father never

[Mr. T. C. Kesava Pillai.]

wanted to make other people see such a miserable sight. It was therefore that he asked his Kanakkan to level down the place so that nobody else could identify the actual number of deaths. This is no exaggeration. Sir, you too had the unfortunate occasion to go and visit all these things. I say it is an unfortunate thing, as the people of that place have lost a good number. I do not want to contradict the number published in the Bulletin. The number given by the Government is only 3,000 whereas the actual number of deaths comes to nearly 9,000. I will substantiate my statement, but I do not think that there is any necessity to contradict the statement contained in the Government publication. I simply want to place before you the fact that innumerable innocents have lost their lives, not in any war. We are exceptionally fortunate in having a patriotic Dewan, who, like Ramayyan Dalava or Raja Kesava Das, having no fear for the stray bullets to come on himself, has gone to the spot, and visited each patient. We are very very happy, and not at all sorry for the lives lost, because our Government is taking particular care for the benefit of the people.

Still I bring to your notice this fact. The sanitary principles adopted there are not quite satisfactory. I do not blame the Sanitary Commissioner. It is only daily routine that is being observed. The Cholera Rules were published on the 24th June 1913. It is only a formality and I do not think that even the conditions given there have been satisfied by the present sanitary arrangements. So, I simply want to urge on the Government once again that stringent measures should be adopted especially during the cholera epidemic season; *i. e.*, during the months of Vrischikam, Dhanu and so on. I said that the North Travancore people are very happy and I do not wish that this epidemic should go beyond the Trivandrum town.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Is the member aware that there are stray cases of attack in Chirayinkil also?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): Yes, I see that from the report.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Will the member give from his experience the rate of mortality in the constituency which he represents in this House?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): So far as the Vilavankod taluk is concerned 65 deaths occur per day; in Kalkulam 37 and in Neyyattinkara 38. Now it is decreasing, that is what the Inspecting Medical Officer informed me.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): According to the member's own opinion, may I know whether it is decreasing or increasing?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): When I started from there the contagion in the coast side was decreasing. I do not think the Inspecting Medical Officer wants to conceal these

things though by daily routine the number is coming up to him. So, I say that the bulletin published by the Sanitary Department convinces that this is no new case; it is only the revival of the outbreak that began in 1103 which made its commencement at Kotimanathura, one mile away from Colachel. I think, therefore, there is negligence on the part of the Sanitary Department. There was a period of one month before the epidemic ceased at the very same locality. There was an interval of one month between the commencement and the subsidence of the epidemic in 1104 and 1103.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): When did this disease begin in 1103?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): Beginning of 1103.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Was it continuing throughout the year 1103?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): Yes. The number of deaths comes to 772 and the number of attacks 1372 throughout the State. But I have not got the actual figures for 1103. I am now referring to 1104.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know from the member whether he thinks that Government have taken sufficient care to prevent this disease in 1103?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): That is what I am coming to. There is negligence on the part of the Sanitary Department in not controlling the disease in more thickly populated areas in Colachel. They had perceived last in Kotimanathura. The contagion generally begins in the beach side. There all of us know the nature of the houses built by these poor people. The attack is generally seen first among the poor people. Death occurs first among the fishermen, Nadars, Pulayas, Pariahs and Nayars, and generally among poor classes. So, from these what I am to infer is that sanitation if properly attended to will check this disease. These are questions of detail for experts to speak about. I simply place before you the real state of affairs. First it began in the coast side, the fishermen transported the contagion through the fish as well as by themselves running into the interior of the country.

MR. MATTHEW MURIKKAN (*Vaikam*): May I know how this contagion passes through fish?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): You may not have seen the fishermen's houses. Those are only small huts. All the refuse and fish will all be mingled together. This fish would be sent to the market for sale and that would be purchased by the low caste people in large quantity and the contagion would spread among them. I would recall one instance to your notice. The so-called *chala* fish is being sold. People purchase about 2 chs. worth of fish and about 6 chs. worth of raw rice and tapioca. The condiments and all would not be properly mixed. The poor people would not get firewood. They take only dried leaves. Accordingly they eat and easily get this contagion.

MR. MATTHEW MURIKKAN (*Vaikam*): May I know how the member comes to the conclusion that it is fish and not tapioca that causes this disease?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): I am speaking from my experience. I have caught hold of fish in some of the markets and examined it and I am convinced that it is the fish that carries the contagion to other people. As regards the area, I bring to your notice that improvements should be made in constructing houses on sanitary lines by Government lending the money. Government should advance money to these poor fishermen getting some security from church funds.

Then the second thing is the nature of the disease. So far as this present attack of cholera is concerned, all the signs of cholera are not present. That is, there would be excretions and so many details. We do not meet all these details. So, some say it is diarrhoea and some say it is cholera. The death rate unlike in other years is more now. It is 80 to 90 per cent. Then as regards treatment in those places we meet with Homeopathic and Allopathic medicines, that is the pro-diarrhoea, Tooms mixture, and potassium mixture, then comes *karpurarish-tam* and brandy or *charagam* and then soot mixed with camphor and some people take petroleum or petrol. There is *bhajana* also. Christians admit also that through David and so on the disease could be checked. Mahomedans say some element is passing. Hindus say *pisachu* is passing. Even Christians after becoming converts are giving *bali*. I simply bring before Government that nobody has belief in this now, because the disease is so virulent. All the shops are closed and it is dreary at night for one individual to pass along the road. It is to such areas that we have transported our vaccinators and doctors and others. In spite of the care the doctors take, the public cannot get the benefit of the treatment under the circumstances. So, I want to place this fact before Government that hereafter, as far as possible, the doctors should be sent in special areas to co-operate with the public and find also means for taking volunteers. Otherwise, in spite of the great pains we may take, there would not be results coming out of that. As regard the effects of the medicines also those who have taken petrol have got cure as also Homeopathic medicines. The so-called pro-diarrhoea mixture if taken at the initial stage has given good; but when the doctor gets information it will be after three or four hours and then the patient will be in a collapsed condition. In Allopathy, these medicines are not of use after a certain stage. Homeopathy is adopted in Kaliakavila and Mangad and other places. They say it is more useful. I do not discuss anything in detail regarding the treatment. I simply bring to your notice that a conference of all these doctors and vaidyans and others should be held.

MR. S. PIRAVIPERUMAL PILLAI (*Commerce and Industry, South*): *Mantravadi* also.

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): If necessary.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know whether any *pisachu* or ghost is contributing to this disease?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): Yes, I have also found that strong well-built persons die in three or four hours.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Is that due to cholera alone?

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): I do not say that. So, what I say is that Government should get an expert to examine all these medicines including *pukayira*. They should publish the final conclusions so that people may purchase and store up that particular medicine and keep it for their personal safety. All these doctors may jointly work in a laboratory to examine all these medicines as we have now ample facilities to get dead bodies, secretions and other refuses so as to find out the cause of this disease. I simply mention all these to place before Government the necessity for appointing a Board for experimenting.

As regards the second point, the water scarcity is well known to you all and I pray that some relief measures may be adopted in distributing some money to the poor people or to make provision to them. I may even request Government to take up some schemes either restoration of irrigation tanks or other work to provide work for these people. Repeated failure of crops has caused poverty to the people. So, it is a request from a set of needy people from an affected area in such epidemic times, and such request should be granted; and I think my friends on this side could not have any objection in doing any favour to a place where nearly 9,000 innocent souls have been lost. In this connection I would tell you, Sir, there are instances where father and mother die leaving three or four young children. I know instances where three or four dead bodies are buried in one single grave. These are minor details which I do not want to place before you.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Sir, I rise to second the motion. At the outset I have to thank the Head of the Administration for the great enthusiasm and vigour he shows in putting down this disease. I have heard from reliable sources that he has visited, and he is visiting, these cholera affected areas and he is warning the head of the Sanitary Department and his co-workers to rise equal to the occasion. But the efforts of the Sanitary Department and the Medical Department have not proved successful. For the week ending 9th Vrischikam the number of deaths is 573. From a paper, I learn that the number of deaths this year till a few days ago is 3,381. Comparing 573 with the figure that was published a few days ago, the inference to be drawn is that the victims of cholera are increasing day by day.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*): Does the member refer to the bulletin published by the Sanitary Commissioner?

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): I do not refer to that. My colleague Mr. Kesava Pillai said that the bulletin published by the Sanitary Commissioner is not correct so far as the figures are concerned.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*): Wherefrom did the member get his figures?

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): I got it from a paper called *Dakshinabharati* in South Travancore.

So, certain primary conditions of sanitation have to be satisfied. We know in South Travancore there is water scarcity to a very great extent. In almost all these places the water used is supplied by the Kodayar Project channels. This water is used for washing, drinking and for every other purpose for which water is required. So, as a permanent cure, wells must be sunk. But as it is not possible at present to enable people to use good water, medicines which can purify this water must be distributed to them free of cost.

MR. P. S. MAHOMED (*Nominated*): ഇപ്പോൾ വിലവാങ്ങിക്കൊണ്ടിരിക്കുന്നതെന്തെന്ന് കൊടുക്കുന്നതു?

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): ഇപ്പോൾ വിലവാങ്ങിക്കൊണ്ടിരിക്കുക കൊടുക്കുന്നതു. ഇനി മേലാലും അങ്ങിനെതന്നെ ചെയ്യണമെന്നാണ് പറയുന്നതു.

What I am saying is that in the future also the policy which the Government is pursuing must be adopted. My friend said that fish is a good vehicle for conveying this disease. If that is a vehicle, proper care must be taken so that the fish that is taken to the market is inspected and then only accepted for sale.

In Trivandrum Town also there are cases of cholera and these cases prevail largely in the slums and crowded centres where poor people are living. The causes that contribute to the spread of cholera in these areas may be the internal conditions obtaining there. It is my experience that in these places where poor people live, the nightsoil is not removed properly. It may accumulate there and operate as a cause for spreading this disease. Therefore proper care must be taken so that the nightsoil is removed immediately from these places.

The Government can do educative propaganda also in this way. We know that poor people are ignorant and are very backward so far as their economic conditions are concerned. Lectures must be organised in places affected by cholera and if they are not sufficient leaflets must be published so that instructions may be given to the people through this medium also. My friend suggested that people in South Travancore do not get proper and sufficient food. This deficiency must be made good.

Another important thing to be considered is the root cause of the disease. If it cannot be investigated here a proper expert must be got down from outside so that researches may be made for measures to eradicate this evil. Otherwise the number of deaths will be increasing and there will be a great diminution in our population. With these words I support the motion.

MR. P. S. MAHOMED (*Nominated*): കാളറ തുടങ്ങിട്ട് എത്രമാസം അല്ലെങ്കിൽ എത്രദിവസമായി?

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): The figure is not available.

MR. D. C. JOSEPH (*Agastisvaram*): Sir, it is my duty to thank Mr. Kesava Pillai who has rightly brought forward this motion in a pertinent hour when cholera is rather spreading in South Travancore. The preventive measures adopted by Government there are not at all satisfactory. From the information supplied by the Government to the public, as is seen from the recent Gazette, we find a bulletin is published in the recent Gazette by the Sanitary Commissioner, and I do not know why that Officer has prepared and published that information when the Medical Department is mainly responsible for the health of the general public in Travancore. From the statistics given in the very same Gazette there is incorrect information. According to the statistics supplied the number of deaths comes to 3,281 for the last three months and according to Mr. Chandy's bulletin the number comes to 3,100 and odd. So both the figures vary and hence the information is not correct. Somehow or other South Travancore is very largely affected by this epidemic year after year. Experts attribute the cause of this dire disease to water difficulty, and as everybody would admit, that water difficulty there, especially during the last season owing to the failure of the monsoon, the public felt to a great extent. Owing to the failure of the crop also the economic condition has gone considerably down and poverty is growing keener and keener. I do not blame any of the officers who are responsible for this sort of affairs in the villages there. Nor do I say that Mr. Chandy or Dr. Raman Tampi or Dr. Madhavan Pillai or Dr. Subrahmanya Aiyar or Mr. Krishnamurti Aiyar are responsible for the rural construction of the villages in South Travancore. But I should emphatically say that more or less certain responsibility rests upon Government officers as a whole. The Peishkar may think practically that he is responsible for the revenue of the Division or of any particular taluk. The Sanitary Commissioner may say that he is expected only to visit certain villages and see whether vaccination is carried on there. The Executive Engineer or the Chief Engineer will think perhaps if water is closed during certain time, that will not affect the interests of the people. The Excise Commissioner will think that the closing of toddy or arrack shops in villages will affect the revenue of Government. All these things are, as a whole, affecting the interests of the poor villages owing to the callousness of certain officers. We are now adopting measures before prevention and it is just like administering Chloroform to a dead man. By way of preventive measure Government are spending a lot of money. They have deputed Deputy Surgeons, and have given them motor cars.

I fear at certain time they would not care for the people at all. In this epidemic season we want men who will be able to bear the difficulties of poor people living in villages and who require proper attention not only from social workers but also from every Government officer. In these matters I am glad that they can travel quickly when they are supplied with motor cars. But there is one difficulty and that

[Mr. D. C. Joseph.]

s these villages are not at all accessible for motor cars. There are no proper roads in them and unless these officers take particular care and have some mercy for these poor dying people, they may not be able to do anything. The Government may spend a large amount of money but it won't be spent in the right way. They might suggest cholera inoculation. I do not know how they apply it because I am not an expert. I also cannot say how it is done.

What the villagers want is proper education from these officers. Prevention is better than cure. When all our friends on the other side of the House happen to visit these villages, they would be moved, as their condition is rather miserable. When they are subjected to such epidemics, they would not be able to bear the brunt of this disease, on account of their poverty. So, what I beg to submit is that something must be done with regard to their nourishment. We may say that we do not want to do anything there on the coast side. But unless we take particular care for the welfare of these people, they will turn out to be a danger to other people of the State. If this state of affairs is allowed, I ask what will be the state of certain villages in South Travancore? They will be wiped out of existence. I do not know whether I will be spared to come here again (*Laughter*). That is the nature of the condition there and we are all afraid of it. Really the disease is spreading and in the interest of the people who are living in other parts of the State, the Government should adopt stringent measures to bring it under proper control. When there was fear of plague in the High Ranges, the Government rose more than equal to the occasion. They did what was in their power, appointed special officers, as many medical men as possible, to these localities and it is a matter for gratification that the scare has been removed to the entire satisfaction of the people. What I beg to suggest to the Government is that the mere supplying of motor cars and other things are not at all sufficient but real propaganda work must be done immediately. Poor people may not care for clothing etc. So, some sort of social work should be commenced immediately. Diet first and medicine next should be the motto of the officers who are entrusted with this important business. I do not say that the Government have not done anything in the matter as Mr. Kesava Pillai remarked. The Dewan personally went into the villages and minutely saw the condition of the people. That is a novel thing. Several of our officers do not care to enter into the villages and they only care for the revenue of the State. But the Dewan has set a good example and we want such officers to co-operate with the public.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Are not the people of South Travancore co-operating with the Government?

MR. D. C. JOSEPH (*Agastisvaram*): Yes, they are co-operating with the Government and even now I am prepared to do any honorary work. The situation there is rather very precarious and I would suggest that as Government were able to do substantial benefit in the High Ranges during the Plague scare, they should also devote more attention to this matter. I hope this cholera epidemic will be brought under

effective control at a very early date. I was rather wondering yesterday when several demands were made for so many items, why this particular item was omitted. I thought the Medical Department will come in for a grant for meeting the situation. But somehow or other I did not find it in the demands.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): May I know from the member whether he is satisfied with the steps now adopted?

MR. D. C. JOSEPH (*Agastisvaram*): Not at all satisfied.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): May I know from the member the approximate number of deaths in his constituency?

MR. D. C. JOSEPH (*Agastisvaram*): More than 400. With these words I strongly support the motion brought forward by Mr. T. C. Kesava Pillai.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Sir, Mr. Kesava Pillai wanted to know the root cause of the epidemic. I will just give a brief history of cholera within the past two years. Last year it started in about the month of Tulam and was going on assuming large proportions. The Government took energetic measures and within two or three months the epidemic subsided. Afterwards there were a few stray cases—

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): But the bulletin says that the epidemic continued till the close of Minam.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): It assumed serious proportions not in Tulam but only at the end of Vrischikam.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): The question is when it closed. The bulletin says that it subsided only at the close of Minam.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Anyhow, I know after three months, it was not at all serious. There might have been a few stray cases here and there. This year it happened to have started in fishing villages. This year is an exceptional one favouring the spread of cholera. First of all, it happens to be a Cycle year. What happens is this. Most of these diseases assume epidemic stage and increase in virulence in certain years and cholera is more virulent in form once in six years than at other times.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Was it foreseen in respect of the conditions in South Travancore?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Yes, it was foreseen. Last year we had no South West Monsoon as it practically failed. The crops were also poor and thus it tended to lower the vitality of the people. In South Travancore of course water supply is very bad. In many places there are not enough wells for drinking water. Many people use tank water both for bathing and for drinking purposes. All these only conduce to the spread of the epidemic. In Travancore we had to face a new situation in regard to this epidemic, *i. e.*, the infection of fishing villages. We have fishing villages from Cape Comorin right up to Trivandrum. These fishing villages, which are very insanitary became infected. On account of panic among them they fled in large

[Dr. K. Raman Tampi.]

numbers from one place to another. In fact the spreading was due to this migration of the fishing folk. The Sanitary condition of the fishing villages has to be improved along with an improved water supply and these are sure to be undertaken by Government later on.

As for the present condition, of course, the Government are doing their best for combating the epidemic.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know from the member whether these improvements of water supply and sanitation of markets have been made in the past?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): They have to be made. I have already stated that the conditions are such that radical improvements will have to be made. We know the root cause of cholera and we also know that it is caused by certain germs and the conditions favourable—

MR. S. PIRAVIPERUMAL PILLAI (*Commerce and Industry, South*): May I know from the learned Doctor whether it is the fish or tapioca that carries the germs?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): I may answer the member easily. If infection reaches it may be by fish or tapioca and it depends much whether the meal is infected or not. In the fishing villages if we go to a cholera house we will find the patient inside a room and on both sides they keep plenty of fish. It is here that the patient vomits and the germs may fall in the fish close by and it is the fish that goes to the market. I have actually seen piles of fish like that and I do not deny that it is more easy to spread through fish than through tapioca.

MR. A. THANU PILLAI (*Trivandrum*): Is not fish from infected areas sold in other parts of the country even now?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): I cannot say. As far as possible we try to destroy the fish when found in infected houses.

MR. A. THANU PILLAI (*Trivandrum*): Can the member say that the fish now sold in Trivandrum is free from infection?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): I cannot say.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Has not fish been proved to be an exciting cause?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Taken in large quantities it is an exciting cause. What I have noticed is this. First of all among these fishing people there is a period when they do not catch fish. When they get big catches, the cholera cases also increase. It has also been found that the number of cases decrease in the fishing villages.

MR. V. CHELLAM PILLAI (*Tovala*): May I know from the member whether it is necessary to prohibit immigration from these villages?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Yes.

MR. V. CHELLAM PILLAI (*Tovala*): If so has he done anything to that effect?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): It is a difficult problem. The Government will have to enact certain rules actually

forbidding people to go from one place to another. These fishing folk do not travel by the ordinary route. They run from one village to another.

MR. V. CHELLAM PILLAI (Tovala): If migration is dangerous is it not necessary to pass urgent laws prohibiting emigration?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): Government are considering the question.

MR. V. CHELLAM PILLAI (Tovala): Are the Government considering the question?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): Government have realised that migration is injurious.

MR. V. CHELLAM PILLAI (Tovala): But, they have not done anything?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): It is under consideration.

MR. V. CHELLAM PILLAI (Tovala): That is what I want to know.

DR. K. RAMAN TAMPI (Inspecting Medical Officer): So far as I know, it is still under consideration.

MR. V. CHELLAM PILLAI (Tovala): Does the member think that there is sufficient water supply in the affected areas?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): I have already stated that water supply is not satisfactory.

MR. V. CHELLAM PILLAI (Tovala): Have they done anything in regard to that?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): It cannot be done in a day. Government will do the needful in course of time.

MR. V. CHELLAM PILLAI (Tovala): Something may be done years hence, probably after all the people of these villages are wiped out?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): I may just tell the House something about the lines of work pursued.

MR. K. P. NILAKANTA PILLAI (Chirayinkil): Is there any department or agency in Travancore today which is properly equipped to combat epidemics like cholera or plague?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): Both the Medical and the Sanitary Departments do the needful to attack these epidemics.

MR. K. P. NILAKANTA PILLAI (Chirayinkil): My question is whether there is at present any department or agency in Travancore which is properly equipped to meet epidemics like cholera or plague?

DR. K. RAMAN TAMPI (Inspecting Medical Officer): Both the Medical and the Sanitary Departments are properly equipped for the purpose.

I may say this. First of all we thought of preventive measures. We carried on inoculation extensively. We know by experience that inoculation is a good preventive and we demonstrated it to the public.

MR. MATTHEW MURIKKAN (Vaikam): What is the sort of vaccine that is used now?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): We use all kinds of vaccine. There are mainly three kinds of vaccines of which the German vaccine is the best.

MR. MATTHEW MURIKKAN (*Vaikam*): Do you use any other vaccine?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): The Bēngal vaccine was also used.

MR. MATTHEW MURIKKAN (*Vaikam*): Which is the best vaccine?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): In my experience the German vaccine is the best.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Is there any peremptory measure for supplying pure water in these infected areas?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): A system of tube wells along the beach will be the best and the easiest. That is what I think. That may not be very difficult. I do not know the details in that matter. I think the Chief Engineer will be able to tell us more about the feasibility of the supply of water for such large areas peremptorily.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Cannot the water now available in the infected areas be purified by some medicine?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): That we are doing. But the point is this. The people are not at all educated in sanitary matters. All that we can do is simply to disinfect the water. We disinfect the water twice a week. But if you only go through the villages you will find that the water—the main source of water supply—is very soon polluted by the people themselves. The first essential in this matter is the education of the people. People must know at least the fundamental sanitary principles. They must be taught the elements of hygiene. I may assure the House that the Government are ever prepared to do all that they can in the matter.

MR. ITTOOP ITTECHAN (*Kunnatnad*): മത്സ്യം ഉപയോഗിക്കുന്നതുകൊണ്ടാണോ കാളറാ ഉണ്ടാകുന്നത്?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): മത്സ്യം ഉപയോഗിക്കുന്നതുകൊണ്ടു കാളറാ ഉണ്ടാകുമെന്ന് പറഞ്ഞില്ല. രോഗബീജങ്ങൾ ഉള്ള മത്സ്യങ്ങൾ ഉപയോഗിക്കുകയാണെങ്കിൽ കാളറാ ഉണ്ടാകും.

MR. ITTOOP ITTECHAN (*Kunnatnad*): മറ്റു വല്ല ആഹാരപദാർത്ഥങ്ങളും ഉപയോഗിക്കുന്നതുകൊണ്ടു കാളറാ ഉണ്ടാകുമോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): ആവക സാധനങ്ങളിലും രോഗബീജങ്ങൾ ഉണ്ടെങ്കിൽ കാളറാ ഉണ്ടാകും.

MR. ITTOOP ITTECHAN (*Kunnatnad*): മത്സ്യം പിടിത്തക്കാർ അവയെ പിടിക്കാതിരിക്കാനും പിടിച്ചു കൊണ്ടു വരുന്നവയെ കഴിച്ചു മുട്ടുന്നതിനും വല്ല ഏർപ്പാട് ചെയ്തിട്ടുണ്ടോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): ഭീനമുള്ള വീടുകളിൽ കാണുന്ന മത്സ്യങ്ങളെ കഴിച്ചു മൂടുന്നുണ്ട്. മത്സ്യം പിടിച്ചു കൂടാ എന്ന് വരികയാണെങ്കിൽ അത് അസംഖ്യം ജനങ്ങൾക്ക് പട്ടിണിക്ക് കാരണമായി തീരും.

MR. ITTOOP ITTEECHAN (*Kunnathnad*): അങ്ങിനെ അവർക്ക് പട്ടിണി വരാതിരിക്കാൻ വല്ലമാറ്റവും അന്വേഷിച്ചു ചെയ്താൽ കൊള്ളാം.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): ഓരോ തുറകളിലും ഉദ്ദേശം രണ്ടായിരത്തിലധികം ജനങ്ങൾ അധിവസിക്കുന്നുണ്ട്. അങ്ങിനെയുള്ള അനേകം തുറകൾ ഉണ്ട്. അവിടെ ഉള്ള എല്ലാ ജനങ്ങളുടേയും പട്ടിണി ഇല്ലാതാക്കുന്നതിനു ഒരു വഴി കണ്ടു പിടിക്കാൻ പ്രയാസമാണ്.

MR. ITTOOP ITTEECHAN (*Kunnathnad*): പട്ടിണികിടന്നാലും കാളറ ഉണ്ടാകുമോ.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): പട്ടിണികിടക്കുന്നതു കൊണ്ടുണ്ടാകയില്ല. അതിനുശേഷം അമിതമായി ആഹാരം കഴിക്കുമ്പോഴാണ് കാളറ ഉണ്ടാകുന്നത്.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Sir, I was just speaking about the preventive measures that we have been adopting. In certain villages where we carried on inoculation last year there was not a single case of cholera even during this severe epidemic. At first we had great difficulty to make the people agree to get themselves inoculated. Now, fortunately, they easily agree to it.

In South Travancore, Sir, unfortunately, the co-operation of the people is not at all enough. I am sorry to say that I have not been able to get workers from the South Travancore villages to go with us from place to place. Only very few people came with us to persuade the people in the infected places to get themselves inoculated and to keep their water, food-stuff and surroundings clean.

MR. D. C. JOSEPH (*Agastisvaram*): Did the member ask for the services of honorary workers at any time?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): They ought to volunteer. The people are expected to volunteer under such circumstances. We cannot be expected to go house after house and request one after another 'Are you willing to help us in this work'?

MR. D. C. JOSEPH (*Agastisvaram*): Did you issue a bulletin asking for voluntary workers?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): That is not necessary at all.

MR. D. C. JOSEPH (*Agastisvaram*): Does he not think that the situation is very serious?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): I know it. But I am sorry to say that only very few persons came with us to help us in this work.

MR. T. C. KESAVA PILLAI (*Kalkulam cum Vilavankod*): May I point out to the member that the Muthukannam Co-operative Society and the Gaudhi Hospital, Kuzhithurai did good work?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Yes. I do not at all deny that for a moment. But my point is that co-operation of the people is not enough. But in the Vilavankod Taluk we had another great difficulty. We had to attack the Homeopathic doctors, nature cure and all sorts of other systems of treatment. On account of the influence of these doctors the people would not take to our treatment at all. These doctors preached against inoculation.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*): Does the member know that in several cases death followed inoculation?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Death, I am sure, has not been the result of inoculation. In such cases the individuals might have been inoculated when the disease was in a dormant condition and they might have been carelessly over-feeding themselves. The over-feeding might have led to diarrhoea and consequent death. Death is not at all due to inoculation. We know for a fact that, with sufficient care, inoculated people have protection from the disease.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): May I know from the member whether there was a single case in which death could be traced to inoculation?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): No; death has never been traced directly to inoculation.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduranged*): Has the Government Bacteriologist examined the different kinds of vaccines now used?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Yes, and he says that the German vaccine is the best available since there is very little sediment in it. There is usually some sediment in these vaccines which causes irritation soon after inoculation; and because of this irritation, people refuse to take to inoculation.

MR. ITTOOP ITTECHAN (*Kunnatnad*): കാളറക്ക് വേണ്ട പരിമാരമാറ്റം ചെയ്യുന്നതിന് ഇപ്പോൾ ഉള്ള മെഡിക്കൽ ഓഫീസർമാർ മതിയാകുമോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): മതിയാകാത്ത സ്ഥലങ്ങളിൽ കൂടുതൽ ആളെ ആക്കിയിട്ടുണ്ട്. ആവശ്യം ഉണ്ടെങ്കിൽ ഇനിയും നിയമിക്കും.

MR. ITTOOP ITTECHAN (*Kunnathnad*): ഇനിയും കൂടുതൽ ആളുകളെ നിയമിക്കുന്നതിന് തയ്യാറുണ്ടോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): ആവശ്യം ഉണ്ടാകുമ്പോൾ കൂടുതൽ ആളുകളെ നിയമിക്കും.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): May I know the number of medical officers now actually engaged in this work?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): 16 are now actually engaged in the work. There are also others, for instance, the officers in charge of some of the hospitals in these infected areas. These officers and their assistants have also been asked to look to the needs of the cholera patients in the infected area.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Including all these officers, what is the total number of medical officers now engaged in the work?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): It will be more than 25 for South Travancore alone, and we are getting substantial help and co-operation from the grant-in-aid hospitals also. Dr. Somerwell and Dr. Noble are doing very good work.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Of the medical officers who have been deputed for this work how many are Assistant Surgeons?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): There are at least six Assistant Surgeons.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): But the bulletin mentions only one.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): That is only with regard to a single taluk; but even there there are other officers also.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): I do not think the bulletin refers to one taluk alone. It refers to the whole of the affected area and it mentions only one Assistant Surgeon, I mean the bulletin that I read in the Gazette. That mentions only one Assistant Surgeon.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Even after the bulletin was published we have deputed some Assistant Surgeons.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): So, when the bulletin was issued, was there only one Assistant Surgeon?

MR. K. GEORGE (*Chief Secretary to Government*): I think that the member is not quoting correctly. The bulletin mentions that these officers were deputed in addition to the squad officers.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*): May I know what the member thinks about the efficacy of Homeopathic treatment for cholera?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): I do not know much about Homeopathic medicines. So, I cannot say anything about their efficacy or otherwise. I have found in my experience that a certain mixture is very efficacious for cholera. We have stocked it and are distributing it very freely.

MR. ITTOOP ITTEECHAN (*Kunnatnad*): ഡിപ്പാർട്ടുമെന്റിന്റെ ഈ ശ്രമംകൊണ്ട് ഇപ്പോൾ കാളറാ കുറഞ്ഞുവരുന്നു കൂടിവരുന്നു?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): ഇപ്പോൾ കുറവാണു്.

MR. ITTOOP ITTEECHAN (*Kunnatnad*): നാട്ടുവൈദ്യന്മാരുടെ ചികിത്സകൊണ്ട് ഈ കാളറാക്കു പ്രയോജനം കിട്ടുമോ എന്നു നോക്കിട്ടുണ്ടോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): ഇല്ല. സാധിച്ചിട്ടില്ല.

MR. ITTOOP ITTEECHAN (*Kunnatnad*): ഒരു സുഖക്കേടുകാരൻ എങ്കിലും നാട്ടുവൈദ്യന്മാരുടെ ചികിത്സ ഉപയോഗപ്പെടുത്തിയാൽ കൊള്ളാം.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): നാട്ടുവൈദ്യന്മാർ ആരും ഇതുവരെ ധൈര്യമായി വന്നു സുഖക്കേടു ഭേദമാക്കാമെന്നു പറഞ്ഞിട്ടില്ല.

MR. ITTOOP ITTEECHAN (*Kunnatnad*): കാളറ ചികിത്സിക്കുന്നതിന്നു നാട്ടുവൈദ്യന്മാർ ആരെങ്കിലും ഉണ്ടോ എന്നു പരസ്യം ചെയ്തു് നോക്കുന്നപക്ഷം നൂറോ അയ്യരമോ ഉണ്ടാകും. പ്രത്യേകിച്ചും ഇങ്ങനെയുള്ള കാലങ്ങളിൽ അതു പ്രത്യേകം ചെയ്യേണ്ടതാണു്.

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): നാട്ടുവൈദ്യന്മാരുടെ കഷായത്തെക്കാൾ ഞങ്ങളുടെ മരുന്നുകളാണു് വിതരണം ചെയ്യാൻ എളുപ്പമുള്ളതു്. അലോപ്പതിമരുന്നുകൾ എല്ലാ പകുതികച്ചേരികളിലും, വാക്സിനേറ്റർമാരുടെ കയ്യിലും, മുൻസിപ്പാലിറ്റിയിലും ഏൽപ്പിച്ചിട്ടുണ്ടു്.

MR. P. S. MAHOMED (*Nominated*): മുൻസിപ്പാലിറ്റിക്കു ഈ മരുന്നുകൾ കൊടുത്തിട്ടുണ്ടോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): മുൻസിപ്പാലിറ്റിക്കു കൊടുക്കുന്നുണ്ടു്. പക്ഷേ അതിനു വിലയും മേടിക്കാറുണ്ടു്.

MR. P. S. MAHOMED (*Nominated*): അങ്ങിനെ വിലതരാമെന്നു പറഞ്ഞിട്ടും കൊടുക്കാതെയിരുന്നിട്ടുണ്ടോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*) : അറിഞ്ഞു കൂടാ.

MR. P. S. MAHOMED (*Nominated*) : പത്മനാഭപുരം മുൻസിപ്പാലിറ്റി അപേക്ഷിച്ചിട്ടുണ്ടായിരുന്നോ?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*) : In regard to the Padmanabhapuram Municipality, it was a personal request that was made and at that time we were short of the medicine. I therefore said that the Municipality can easily purchase the medicines if they knew the formula, and I gave them the formula.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*) : Was there cholera prevailing in the town of Alleppey?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*) : There might have been stray cases ; but not at all severe.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*) : Does the member know that there are cases which have been very successfully cured by Homeopathic treatment?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*) : I do not know.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*) : There are several cases like that.

DR. K. RAMAN TAMPI (*Inspecting medical Officer*) : That may be. But what I say is that when there is severe epidemic we cannot try system after system or pin our faith to a system about which we do not know anything definite. At any rate, I, for my part, will not advocate Homeopathic treatment. There is one medicine in our hands which has proved very efficacious. So, we have stocked it for free and extensive distribution. I am not going to recommend Homeopathy or Ayurveda or any other system of treatment since I do not know much about their efficacy. I think it is not a safe procedure to recommend all sorts of treatment, about the efficacy of which we are not quite sure, when the country is in the jaws of an epidemic.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*) : May I know whether the Allopathic doctors have used anything except pro-diarrohea mixture for cholera?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*) : They were using potassium-permanganate pills and other mixtures also, but now we stock and use pro-diarrhoea mixture since it is very efficacious and cheap and can be made here.

MR. N. K. KRISHNA PILLAI (*Neyyattinkara*) : Is it being used for all stages of the disease?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*) : It can be used in all stages of the disease except during collapse when we supplement it with other treatment.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*) : What is your cheap method for prevention of the disease?

DR. K. RAMAN TAMPI (*Inspecting Medical Officer*): Inoculation is one of the methods of prevention. We have also arranged for the disinfection of the houses. Cleanliness is also far more attended to now. Additional sweepers have been appointed in the infected villages and people are also being taught how to keep their surroundings clean. The infected houses are being thoroughly disinfected.

PRESIDENT: Your time is up.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Sir, while supporting the motion before the House, I want to bring to the notice of the House certain matters which require immediate consideration. Neither the mover of the motion nor the member who spoke in support of the motion was in a position to give us definite figures showing the mortality on account of this epidemic. While the official member was speaking, I put a pointed question to him whether there is at present any particular department or agency in Travancore which is properly equipped to meet epidemics like cholera and plague. The member's reply was in the affirmative. Before challenging the reply, Sir, I would like to know which is the department or agency apart from Government which may be held directly responsible to keep such epidemics under control and to adopt immediate measures to prevent the spread of such epidemics. From the information that I was able to collect from the reports of the different departments published by the Travancore Government I came to the conclusion that there is no department or agency to take up the sole responsibility in this matter. I find, Sir, the Sanitary Department blaming the Land Revenue Department and the Medical Department saying that they are not directly concerned with the general sanitation of the State.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know whether the sole responsibility in such matters can be entrusted to any particular department?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Members should put relevant questions which generally require information.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know from the member how it is irrelevant?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): I am urging that a particular department ought to be made responsible for public health. That is the trend of my argument which any reasonable man can understand.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know whether the Sanitary Department and the Medical Department are not fit to undertake this responsibility?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Why, even I can undertake it provided I am given the necessary equipment. My point is that no department has been made responsible for public health in this State.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I know from the member whether the undertaking of this responsibility by any department would prevent this disease.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Certainly, if the Medical Department or the Sanitary Department is equipped properly and worked efficiently, such epidemics can be kept under control; but not the Land Revenue Department or the Survey Department which have nothing to do with cholera (*Laughter*).

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): May I point out to the member that no other member spoke about the Land Revenue Department or the Survey Department and that the Sanitary Department and the Medical Department are alone concerned with the subject matter of the present motion?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Sir, proceeding with my argument, to convince the House I need only quote certain passages from the reports published by the Government to refute successfully the answer given by Dr. Raman Tampi to my question whether the Medical Department or the Sanitary Department is properly equipped at present to meet epidemics like cholera or plague. The Sanitary Commissioner in his report for 1102 M. E. says:

"The methods adopted at present in fighting out cholera are, in most cases primitive and unscientific and are therefore inadequate to meet the requirements of the situation especially when the disease assumes unmanageable proportions. Large sums of money are spent in trying to control the heavy mortality caused by this disease in pursuing a policy of locking the stable door after the horse has been stolen. The prevention of such epidemics consists in taking steps to avert their occurrence by removing the root cause of infection."

It is basing on this information that I put the question and the information now I give before the House shows that middle-age methods are employed to combat the disease. No up-to-date methods are properly used by our department to successfully meet cholera or plague. Sir, during the recent out-break of plague in the northern parts of Travancore it was brought to my notice that neither the Medical Department nor any other department supported by Government, possessed a proper syringe with which disinfection could be carried on efficiently. Such is the state of affairs prevailing in Travancore. I ask the question whether there is any use of spending so much money in supporting the General Hospital and various similar institutions in the State and also in supporting an army of doctors who will not do and who are not good to do things properly and also who are not given the necessary things which they are expected to possess to do their duty properly. Again, Sir, from the figures available before the House, nobody can be in a position to know what is exactly taking place in South Travancore. From the information brought to me, and, Sir, I unfortunately did not bring them - I have a great mind to challenge the information published by the Government through the bulletins. It is no doubt true that those informations were prepared by responsible persons. But members of the Popular Assembly gave me information that the Gazette publications were false. In the Gazette it was published that in a certain village there was no death. But several villages with the names of persons

[Mr. K. P. Nilakanta Pillai.]

who died and the names of the houses where death occurred, were supplied to me. That is the nature of the work which is being done by responsible officers who are deputed to do, both preventive and curative work. With regard to this disease there are no reliable statistics before the House. Supplying this House with reliable statistics was mooted by me long before, and I beg to submit, nothing definite has been done. Sir, in the statistics for the year 1102 M. E. we find that the total number of deaths from cholera is only 17. The Sanitary Department published in their report that the total number of deaths was 21. The Medical Department will say that the total number of deaths was only six. When such is the case, what I submit is, who can attach any value to these publications published by our Government.

MR. D. C. JOSEPH (*Agastisvaran*): May I know who is responsible for the preparation of vital statistics?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): I ask the question to the Government and they are bound to answer it now.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Does the member know that the Medical Department is not responsible for recording deaths taking place outside their hospitals?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): If they are not responsible for that, the Sanitary Department is responsible.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Then how can the member say that records of the Medical Department are wrong when they only relate to deaths actually taking place in the hospitals?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): They need not be. The matter is very clear. Figures given by the Sanitary Department are wrong.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): How does the member know that deaths recorded by the Medical Department are not included in the Sanitary Commissioner's report?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Statistical volume records the number of deaths as 17 and the Sanitary Commissioner reports the number of deaths as 21. From this it could be inferred that there is enough contradiction to show that these figures are unreliable. We need not go to the Medical Department at all for figures.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): That is to say, the Medical Department is concerned only with deaths that take place within the hospitals.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): May be.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Those deaths are reported to the Sanitary Commissioner who embodies them in his report? How can he say that one is wrong in the light of the other report.

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Anyhow, out of the two figures I read, one should be wrong.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Why should it be?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): Why not?

The Statistical volume gives the death figure as 17 and the Sanitary Department records as 21. This is absolutely wrong. On the other hand if the Statistical volume gives the Sanitary Commissioner's number, then there is some sense in that. In that case I can understand the significance of the Statistical volume.

MR. A. THANU PILLAI (*Trivandrum*): May I know whether there is any basis for the statement that the figure given in the Statistical volume was supplied by the Medical Department?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): I do not know that. But it is there.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Does the member realise the fact that the deaths recorded in the Statistical volume relates to the total number of deaths in the State, whereas the number recorded in the Departmental report of the Medical Department is the number of deaths that took place in the hospitals?

MR. K. P. NILAKANTA PILLAI (*Chirayinkil*): My friend is confusing the whole issue. I have no quarrel with the Sanitary Department or the Medical Department or Government. The figures given in the Statistical volume must be presumed to be the number for the whole State. The Sanitary Department which is directly responsible for sanitation should properly register all deaths happening all over the State. That figure also must be taken to apply for the whole State. My point is this. First of all, those figures are unreliable. Secondly there is no agency to prepare proper statistics. Such a state of affairs is being deplored by the Sanitary Commissioner himself who says in his Administration Report for 1102 thus:

"Under these circumstances, the present statistics are of little value for any inferences based on them being drawn for purposes of public health. The importance of the relation of accurate Vital Statistics to preventive medicine may be recognised from the facts that it is essential that information should be available regarding the specific diseases contributing to any sickness or mortality, the communities susceptible to them, the age at which the incidence occur and the particular localities of such occurrence for the inception of measures necessary to combat them. It is obvious therefore, that if progress in public health matters is to be attained, local officers entrusted with the management of Vital Statistics, should devote every attention to ensure at least a reasonable accuracy in the figures recorded."

These statements also are recorded. Now what I ask is, what action has been taken by the Government on the remarks passed by the Sanitary Commissioner in his report for that year? Is it necessary to know the condition of the public health in the State and also to know what ought to be done especially in seasons when epidemics visit our country? Without sufficient materials which could be collected from carefully prepared statistics, nobody can do anything. Under these circumstances, Sir, what I submit is, there is no department in the State which has properly

[Mr. K. P. Nilakanta Pillai.]

considered the question, which has analysed the various causes or which has considered the epidemiology of cholera or plague in this country or which has carried on investigations and first published the results of their investigations for the knowledge of the public as a whole. This is not the first time that our country has been attacked by cholera. Several of my friends were telling me that there is a periodical outbreak for some years and I believe the Government might have experienced that. In the face of these things I ask the question, what has been done for the last so many years when they were quite aware of the fact that they will have to experience an attack of cholera at least after a few years hence. Nothing definite has been done till now.

Secondly, Sir, my information is that cholera outbreak in Travancore has not been properly controlled or even properly brought under control. Even today it is going on increasing and anybody can see that it is not being properly controlled. From Southern Travancore it has come to my constituency. Last week and this week there have been several cases of deaths due to cholera in my constituency. What is to be done? No special officer has been deputed. There is only a dispensary at Chirayinkil, and when cholera attacks Kilimanur, for instance, which is fourteen or fifteen miles away from Chirayinkil, the Medical Officer in charge of the dispensary is not expected to go there and properly administer aid to the cholera stricken people. This also will show, Sir, that sufficient measures have not been taken. I grant that the Head of the Administration is taking a very active part in seeing that the subordinates do their duty properly and he is also very interested in keeping this epidemic under proper control. But that alone will not work. A single man would not be able to do all these things. These matters I bring to the notice of this House in a general manner, because I do not want to accuse any particular officer. I do not want to accuse this officer or that officer. I know, Sir, that one or two officers are doing their duty properly, but all the others are sleeping. I hope the Head of the Administration will think of them and they must not be allowed to occupy a place which they are not fit to occupy, especially at a season when the whole country is panic-stricken. I have sent some interpellations to the Government about the work done by the Trivandrum Municipality and the other municipalities in South Travancore, the Medical Officers, the Health Officer and the Sanitary Commissioner. If answers to these questions were available to this House, I hesitate not for a moment in saying that the House would unanimously have condemned certain officers and even transported them out of Travancore to-day. Sir, with these words I say that everything has not been done, that more has to be done and that immediate measures ought to be taken because the bad season is only getting in and if it is not kept under check, it may grow worse.

MR. MATTHEW MURIKKAN (Vaikam): Sir, I rise to support the motion introduced by Mr. Kesava Pillai. As I come from North Travancore, I think, I can express my opinion in this matter without motion or

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excitement. My friend Mr. Kesava Pillai when he introduced the motion said, at least he remarked, that absolute poverty and scarcity of water are two of the prime causes of cholera in South Travancore. I do not of course share his views as to the role of spirits. I have absolutely no faith whatever in that opinion of Mr. Kesava Pillai. As to the condition of South Travancore, it is not possible to make South Travancore rich all on a sudden. That is a work which has to be done in the long run. When you consider the question of water-scarcity, it is not easy to supply all the water necessary for South Travancore from outside by artificial means. Anyhow, something ought to be done in that direction. The old tanks ought to be restored. There is no use of trying to make South Travancore a rich colony all on a sudden, but the matter of restoring the old tanks can be attended to immediately and that will be effective relief.

Then I shall also finish what I have to say by referring to some of the preventive measures, at least by referring to the relief work adopted at present. The Medical Officer stated that inoculation is resorted to on a very large scale. He said that in 1103 it was very freely availed of. There is in the minds of the public some uneasiness in regard to the vaccine that is being used for inoculation. The Medical Officer says that the German vaccine is the best. But there are other doctors who differ and when doctors differ I do not know what to say. As regards the relief work, the number of officers deputed is not at all sufficient. Even with regard to the efficiency of the work turned out I am inclined to think that the Medical Officers are inexperienced juniors; many of them at least are inexperienced juniors. I cannot for a moment understand how the Government take it into their head to send juniors for this serious medical work. When Dr. Madhavan Pillai asked how many senior Medical Officers were sent, the answer was that seven seniors were sent to the affected place. If he had asked a question as to the number of years of their experience I am sure the answer would not have satisfied the House at all. Therefore in regard to the solution of the problem I hope that this matter also will engage the attention of the Government at this important moment.

Then again I understand that these Medical Officers are allowed the use of motor cars freely. I am sure any number of motor cars that may be used by these Medical Officers will not enable them to do the needful. I do not think that special centres are fixed for these officers. A number of them have been sent to South Travancore, but they have not been assigned specific centres. They must be assigned some special centres and asked to confine their activities to those special centres. With the co-operation of the public at large these Medical Officers will be able to do substantial relief work.

PRESIDENT: I can correct the member on that point. Every Medical Officer has fixed headquarters and he works from that centre along fixed areas.

MR. MATTHEW MURIKKAN (*Vaikam*): I understand from the President that centres are fixed. Even if centres are fixed, special care is to be exercised in seeing that the Chief Medical Officer of each unit is available in his headquarters. There is no use of these Medical Officers roaming about the country in their motor cars and moving from place to place. Therefore care must be exercised by the Government in increasing the number of hands and also in making the necessary arrangements for the Chief Medical Officer being available in his headquarters. With these words I support the motion of Mr. Kesava Pillai.

MR. A. S. DAMODARAN ASAN (*Mavelikara cum Kartikapalli*): In supporting the motion before the House I wish to speak a few words. Happily for us in Central and North Travancore this fell epidemic has not made its unwelcome visit. As newspaper reports have terrified me completely I have not dared to visit these infected areas. So, I must admit that I am not specially fitted for supporting this resolution and I do not want to rely on newspaper reports or publications of the Government which are questioned by so many responsible persons. Anyhow, I will take this opportunity just to sound a note of warning to the Government. I was under the belief that our State on this side of the Ghats is free from this epidemic and it is only now that I learn that a large part of South Travancore was and is subject to the attack of this most serious epidemic. I fear that if the Government do not take active steps to ascertain the root causes of this disease it is likely to extend its activities to the other parts of the State.

Sir, the Government should not be satisfied with merely getting rid of this disease temporarily; they should appoint a committee to enquire into the causes of this disease and see that our doors are completely shut against its entrance in future. Otherwise the epidemic which used to do havoc only in South Travancore, and which has now gone as far north as the constituency of my friend Mr. K. P. Nilakanta Pillai, is likely to extend its activities to Central and North Travancore; and the Government will have to meet it when it has acquired much more strength than now. The Government should therefore show that they are prepared to use all the resources at their command to root out this disease at the earliest opportunity. Generally whenever our friends from South Travancore apply for more funds for providing means of communication or irrigation, we grumble; but this is a matter which affects the interests of the State as a whole, and, I may assure the House that we, coming from Central and North Travancore, have absolutely no objection in spending any amount for preventing the recurrence of this dangerous disease. With these words, I support the motion before the House.

MR. K. GEORGE (*Chief Secretary to Government*): Sir, the Government are glad of the opportunity that this adjournment motion has

offered them to place before the House what work they have been doing in connection with the suppression of cholera epidemic in South Travancore. Before I proceed to explain what the Government have been doing, I wish to refer to one or two statements made by my friend Mr. K. P. Nilakanta Pillai. He asked whether any particular department is entrusted with the care and custody of the public health of the State. I may tell him that, as at present constituted, the Sanitary Department is not, properly speaking, a public health department; but the Sanitary Department and the Medical Department working together would be a fit instrument to safeguard the health of the citizens of the State.

Mr. K. P. Nilakanta Pillai referred to some difference in the Statistics. I am afraid he has made a mistake, for I find from the same Statistical volume, that the total number of deaths from cholera in 1102 is 21, and not 17. If we turn to page 286 of the volume, we will find the total for urban areas is 4, the total for rural areas 17, and the total of the two is 21. He appears to have referred only to page 284 where the total is given as 17, being the number of deaths in rural areas alone.

Another point I wish to add is that in the matter of the preparation of these vital statistics, Government cannot but admit that there are defects. The Statistics are now prepared by the Revenue Department; and they are consolidated by the Sanitary Commissioner. Owing to the paucity of hands in the Revenue Department and the very large areas which a prowerthicar has to tour round to secure information, it is not unlikely that the Statistics are inaccurate. But they are not utterly so unreliable as to be discredited.

Now, I shall proceed to deal about the present epidemic of cholera. Dr. Raman Tampi has told the House how there was a first outbreak last year, *i. e.*, in Tulam 1103. That more or less subsided by the end of Kumbham. A recrudescence took place in Mithunam. An immediate report was made to Government by the Sanitary Commissioner; Government thereupon ordered a deputation of 3 Sub-assistant surgeons to the affected areas to undertake cholera work. Two of them were deputed to the Kalkulum Taluk and one to Chirayinkil Taluk where the epidemic was then reported to have just commenced. Afterwards the Sanitary Commissioner was asked to tour about the place at once. He did so and he reported that some further measures were necessary. At his instance a cholera squad was constituted and the Inspecting Medical Officer was asked to form and control it. That was some time in Chingam. Well, we were hoping and the information so far as we got did not cause any serious anxiety in the minds of Government that the epidemic would speedily subside. But subsequently, it came to the knowledge of Government through the reports sent in by the Sanitary Commissioner that the disease was not subsiding, that if in one week it showed a subsidence, the next week it showed a tendency to advance. At this stage, the Government called a conference at which the Inspecting Medical Officer, the

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Sanitary Commissioner, the President and the Health Officer of the Trivandrum Municipality were present. Certain measures were then decided upon. I cannot speak from memory what took place there, but I shall give a brief description of what was done. 3 Cholera squads were ordered to be opened at once, one at Neyyattinkara where the disease was making inroads, another at Kuzhitturai and a third at Kalkulam. To protect the town of Trivandrum and to help in the adoption of prophylactic as well as curative measures, Government appointed one Sub-Assistant Surgeon and a Sanitary Officer at the outskirts of Trivandrum to assist the Health Officer. At Neduvangad one Sub-Assistant Surgeon and 4 Sanitary Officers were posted. At Neyyattinkara a squad consisting of 1 Assistant Surgeon, 2 Sub-Assistant Surgeons, 4 Compounders and 4 messengers was formed.

MR. R. KESAVA PILLAI (*Kottarakara cum Kunnattur*): Are there cases of cholera in Neduvangad?

MR. K. GEORGE (*Chief Secretary to Government*): There were cases of cholera there somewhere in the beginning of Tulam.

In Vilavankod and Neyyattinkara 3 Sanitary Circle Officers and 53 Vaccinators were also promptly sent. In Kalkulam first two Sub-Assistant Surgeons, one Sanitary Circle Officer and 4 Vaccinators to assist the squad officer were sent. Again at the Cape one Sub-Assistant Surgeon was sent. These were the initial staff and it has been strengthened subsequently. Now I understand, for instance, that a senior officer has been sent to the Cape. Somebody questioned whether these officers were experienced. I can assure the member that the men selected are quite experienced and two of them are rather senior officers. They are not Deputy Surgeons, but Senior Assistant Surgeons of experience and one or two have special experience in public health work. In the selection of the staff, I may assure the House that special care has been taken to see that only qualified men were deputed.

The staff working at the present moment in the infected areas consists of 3 Assistant Surgeons exclusive of the one just now sent, 16 Sub-Assistant Surgeons, 8 Compounders, 5 Sanitary Circle Officers, 3 Sanitary Inspectors and 75 Vaccinators. In fact, one half or perhaps more than one half of the staff of the Sanitary Department has been deputed for cholera work in South Travancore. So much about the staff. The Government have also been freely spending money in this connection.

MR. A. THANU PILLAI (*Trivandrum*): May I know the nature of the work done by these Vaccinators?

MR. K. GEORGE (*Chief Secretary to Government*): I understand the whole Sanitary staff is working under the squad officers. The Vaccinators are engaged in disinfection, chlorination of wells and other water sources and in the distribution of leaflets. Medicines are distributed not only through this staff but also through all the Proverthiars whose cutcherries in the affected areas have been converted into dispensaries and are kept open during day and night.

MR. N. R. KRISHNAN (*Nominated*): ആയുർവേദ ഡിപ്പാർട്ടുമെന്ററു നോട്ടു ഈ സംഗതിയിൽ വല്ലതും പ്രവർത്തിക്കുന്നതിന്നു ഗവണ്മെന്റു ആവശ്യപ്പെട്ടിട്ടുണ്ടോ ?

MR. K. GEORGE (*Chief Secretary to Government*): Until now the Ayurvedic Department have not been asked to take any measures in this connection.

MR. N. R. KRISHNAN (*Nominated*): ഈ സംഗതിയിൽ അവർകൾ വല്ലതും പ്രവർത്തിക്കുന്നത് കൊള്ളാമെന്നു ഗവണ്മെന്റു വിചാരിക്കുന്നുണ്ടോ ?

MR. K. GEORGE (*Chief Secretary to Government*): Well, nothing prevents really the Ayurvedic Vaidyans in those places from doing as much work as they can do.

PRESIDENT: Up to the present time no patient suffering from cholera has asked for the Ayurvedic system of treatment and they have asked for the Allopathic system of treatment.

MR. K. GEORGE (*Chief Secretary to Government*): The President tells me that no patient has yet asked for Ayurvedic system of treatment. So it will be seen that the Government have been quite alive to the needs of the situation both in the matter of staff and in the provision of money. The expenses of the two Departments together would come to Rs. 34,000. You might ask why the Government did not come up before the Council for meeting that expenditure. It was because we had not the information at the time when we called the Council as to what the total cost would be. The amount for the Medical Department would be Rs. 25,000 and for Sanitary Department Rs. 9,000. The expenditure is being incurred in advance of Budget provision as it is very urgent and the Government propose to take action under the emergency provision of the Legislative Council Regulation. I am sure the members will now realise that the Government have done all that can be done in this matter.

L. R. RAJA RAJA VARMA KOILTAMPURAN (*Changanachery cum Peermade*): മറുസ്ഥലങ്ങളിൽ ഇതു പകരാതിരിക്കുന്നതിന്നു എന്തെങ്കിലും ചെയ്തിട്ടുണ്ടോ ?

MR. K. GEORGE (*Chief Secretary to Government*): I am glad that the member has reminded me of what the Government have done in that matter. One member suggested that immigration of the people from the infected villages should altogether be prohibited.

MR. S. PIRAVIPERUMAL PILLAI (*Commerce and Industry, South*): May I know from the Member whether people are allowed to go to the Ashtami at Vaikam ?

MR. K. GEORGE (*Chief Secretary to Government*): They cannot unless they produce a certificate of inoculation from Medical Officers. A notification was issued similarly for the St. Xavier's Festival which took place at Nagercoil, preventing people from the infected areas from attending the festival. It is only in such ways that Government can prevent immigration from infected places. Taking of steps to prevent absolute immigration, might, the Government fear, create a panic among people and therefore such a step has not been taken so far. The Government have got recently certain rules framed under the Epidemic Diseases Regulation for taking emergent steps when occasion arises. They will be examined and issued shortly.

MR. L. R. RAJA RAJA VARMA KOILTAMPURAN (*Changanachery cum Peermade*): ഭക്ഷണസാധനങ്ങൾ ഇൻഫെക്റ്റഡ് ഏരിയയിൽ നിന്നും മറ്റുസ്ഥലങ്ങളിലേക്കു കൊണ്ടുപോകാതിരിക്കുന്നതിന് എന്തെങ്കിലും നിയന്ത്രണങ്ങൾ ചെയ്തിട്ടുണ്ടോ?

MR. K. GEORGE (*Chief Secretary to Government*): At present no order has been issued preventing the transport of food stuffs. That is a matter that affects the livelihood of people and whether at this juncture the Government should take steps to prevent the free sale of food stuffs is under consideration. As a matter of fact the Government have done nothing in this direction so far. The Government have issued instructions that decomposed food when found in streets or in open places should be destroyed; also so far as fish curing is concerned the Government have instructed the Director of Agriculture not to issue cheap salt to the fisher folk so that the curing of fish may be done only in Government Fish Curing yards. These are all the measures that are deemed to be necessary at present.

MR. L. R. RAJARAJA VARMA KOIL TAMPURAN (*Changanachery cum Peermade*): വേവിക്കാതെ ഭക്ഷിക്കുന്ന ഭക്ഷണസാധനങ്ങളെ അന്യസ്ഥലങ്ങളിലേക്കു കൊണ്ടുപോകാതെ തടയാൻ സാധിക്കുകയില്ലേ?

MR. K. GEORGE (*Chief Secretary to Government*): That is a matter which has to be considered. It may affect many people, particularly in Trivandrum, where they have to get their supply from the outskirts of the Town. I think, if that is done, the whole of Trivandrum will starve.

MR. L. R. RAJA RAJA VARMA KOIL TAMPURAN (*Changanachery cum Peermade*): ഉദാഹരണമായിട്ടു മോട്ട മുതലായ സാധനങ്ങൾ.

MR. K. GEORGE (*Chief Secretary to Government*): We have not done it so far. It will be considered and if such a step is expedient and necessary, it will be taken.

MR. A. G. MENON (*Parur*): In view of the fact that the contagion has spread among the poor people, will it not be advisable for Government to supply them with clean food?

MR. K. GEORGE (*Chief Secretary to Government*): I am glad that the member again has reminded me about it. The money given to the Medical Department is not spent entirely on medicines or staff or motor cars. A good deal of it goes in the shape of charitable donations, sometimes in the shape of clothing and sometimes in the shape of food. These are also supplied at Government expense in deserving cases.

So, in that matter also the Government are not illiberal. Now, I should like to say a word of commendation about the work that is now being done by our officers. We all know that a considerable number of officers are working in the infected areas. They are working in the midst of a terrific and appalling disease and I think it is our duty, now that we are discussing the matter, to record a word of commendation about the work that they are doing.

MR. MURUVELIL PACHU PILLAI (*Shertallai*): സമുദ്രതീരത്തു നിന്നും ട്രെയിൻ അകത്തുള്ളതിൽ രോഗം ബാധിച്ചിട്ടുള്ള ആളുകൾ കടക്കുന്ന തായി മെഡിക്കൽ ഓഫീസർ അദ്ദേഹത്തിന്റെ പ്രസംഗത്തിൽ പറഞ്ഞു കാണുന്നു. അതിനെ തടയേണ്ടതാവശ്യമല്ലേ? അതിനുവേണ്ടി വല്ല മാർഗ്ഗവും ചെയ്തിട്ടുണ്ടോ?

MR. K. GEORGE (*Chief Secretary to Government*): Sir, I have already answered that.

PRESIDENT: It has already been answered.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Considering the very bad condition of South Travancore villages, will the Government kindly consider the advisability of appointing a Medical Officer, with special qualification in public health, to be in special charge of these villages?

MR. K. GEORGE (*Chief Secretary to Government*): I believe Mr. Madhavan Pillai is aware that shortly we are going to be helped, in the matter of the organisation of a Public Health Department for Travancore, by an officer of the Rockefeller Foundation. In that connection, this as well as other similar measures connected with the public health of the State, will be considered and carried out in consultation with the officer of the Rockefeller Foundation.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): May I know what is now being done in villages that are not actually infected by cholera but are in imminent danger of getting infected?

MR. K. GEORGE (*Chief Secretary to Government*): I believe conservancy stations are being organised so far as funds permit.

Both the Sanitary and the Medical Departments are now fully engaged in combating this disease in places where it is raging and therefore it is not possible now to concentrate as much attention, on the localities that have not been affected, as Government would like to do.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Does it not mean that we are inviting cholera?

MR. K. GEORGE (*Chief Secretary to Government*): We are suppressing cholera where it occurs so that the question of its being carried into other places may not arise. Besides, certain preventive measures are being adopted in unaffected places, for instance, mass inoculation is being carried on.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): This epidemic which began in Tulam last has practically continued for the last thirteen months with some interruption. So, will not the Government consider the advisability, irrespective of the question of the re-constitution of the Sanitary Department into a Public Health Department, of appointing a special officer, with special qualifications in public health, to be in sole charge of preventive work in the areas that are in imminent danger?

MR. K. GEORGE (*Chief Secretary to Government*): Does the member suggest this as a permanent measure or as a temporary measure for the present?

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Till a Public Health Department is organised.

MR. K. GEORGE (*Chief Secretary to Government*): Government will consider that point.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Will the Government consider the urgent necessity of sinking some tube wells also?

MR. K. GEORGE (*Chief Secretary to Government*): So far, Government have not considered the necessity of opening tube wells immediately as it is a matter which will take time.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Have the Government taken note of the fact that the Sanitary Commissioner himself has admitted that it is impossible to disinfect running water in channels which in their turn feed the tanks out of which drinking water is taken by the people?

MR. K. GEORGE (*Chief Secretary to Government*): Yes. Government do not deny that it is necessary to have more wells in these places.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Then why not the Government do something immediately?

MR. K. GEORGE (*Chief Secretary to Government*): Government will consider the question and see if any thing can be done immediately.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Are the Government prepared to give any encouragement to those medical men who are prepared to go to these infected areas to fight the epidemic?

MR. K. GEORGE (*Chief Secretary to Government*): That is a matter on which I cannot give an answer off-hand.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Can the Chief Secretary give any instance in which a medical man has offered to work in the infected areas?

MR. K. GEORGE (*Chief Secretary to Government*): That information is not before me.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Are not these persons who work in these infected areas, worthy of encouragement?

MR. K. GEORGE (*Chief Secretary to Government*): Certainly, they are.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): I want to know whether Government will favourably consider the case of such people who actually risk their lives in fighting cholera.

MR. K. GEORGE (*Chief Secretary to Government*): That is a proposition which has first to be taken up by the Administrative Board. Government will consider it when it comes up to them.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Do not the Government consider it reasonable to give encouragement to such workers?

MR. K. GEORGE (*Chief Secretary to Government*): But, in regard to emoluments, Government do not take the initiative.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): The Chief Secretary is stating only the constitutional position. But at present the situation is grave. As such, are not these people deserving of encouragement?

MR. K. GEORGE (*Chief Secretary to Government*): I have already said they are. If the matter comes up to Government it will be considered.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): If encouragement is offered, will it not induce people to do better work?

MR. K. GEORGE (*Chief Secretary to Government*): The point will be considered, of course.

In this connection, Sir, when we have been speaking about all that the Government and their officers have done to combat the disease, I submit, that the House will be failing in its duty if it does not record its appreciation of the good work that has been done by some of the Catholic fathers in these infected villages. We cannot also forget the work that has been done, in combating the epidemic, by some of the private medical agencies in South Travancore, particularly, the Salvation Army Medical Officers and the L. M. S. Medical Officers.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): Is there any tendency to discourage the use of vaccines?

MR. K. GEORGE (*Chief Secretary to Government*): Government are not aware.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): If there is such tendency will the Government take action to prevent it?

MR. K. GEORGE (*Chief Secretary to Government*): Government must first be aware of it before they propose to take action.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): We meet again only in Minam next. So, if in the meantime, the Government come to know of it, will the Government take action to prevent it?

MR. K. GEORGE (*Chief Secretary to Government*). I hope Dr. Raman Tampi will have another opportunity to speak on the subject.

I have only a word more to submit, and that is, the absolute urgency of forming voluntary organisations to combat the disease. Government are doing their best in the matter. They have been unsparing both in the provision of staff and in the expenditure of money. But this is a matter in which the public also have to co-operate to a very great extent. I think the best way to co-operate with Government in a matter like this is to form bands of voluntary workers in the various towns and villages where the disease is prevalent. Such voluntary organisations can do a lot of work. This is a social work which every human being, interested in the welfare of the poor, ought to do willingly. Such organisations can help the Medical Officers in ever so many directions, for instance, in disinfection, chlorination of water, educating the public and so on. They can raise public subscription and use the money for feeding the poor and for providing them with clothing and bedding. The help that the Government can give in such directions cannot but be inadequate. The disease prevails mainly in South Travancore. The people in other parts of Travancore can give substantial help in the shape of money, clothing etc.

MR. A. THANU PILLAI (*Trivandrum*): May I know whether propaganda work is being done now?

MR. K. GEORGE (*Chief Secretary to Government*): Some propaganda work is being done. But that is not enough. The people also should raise money to feed and clothe the suffering poor. Food and clothing are the important essentials at this time. I now remember a similar juncture during the 1099 floods when the people, as soon as they were roused, came forward to help with great enthusiasm. Voluntary organisations arose in all parts of the country. Such organisations ought to be formed now. That is why I make this appeal to the House.

MR. K. MADHAVAN PILLAI (*Trivandrum cum Neduvangad*): What is the initial help that the Government are prepared to give for such voluntary organisations?

MR. K. GEORGE (*Chief Secretary to Government*): The initiative should come from the people. In municipal areas the municipalities should undertake the work; in rural areas the public spirited citizens should form voluntary organisations. In a matter like this I think it is the duty of the public to render as much help as they possibly can to the suffering people.

MR. A. THANU PILLAI (*Trivandrum*): May I know whether the Government realise the necessity for deputing more Medical Officers in view of the fact that the disease has not shown signs of subsidence?

MR. K. GEORGE (*Chief Secretary to Government*): As I have already stated, Government are ever ready to spare any number of Medical Officers so far as they are available. We have already sent a large number of men. If more are needed Government are willing to take off as many as are required from the hospitals in North Travancore. But Government are informed that the epidemic is already showing signs of going down.

PRESIDENT : The debate automatically closes at 5-30. But I do not think that the mover need regret that his motion did not come to vote, for, in this particular matter, the Government and the non-official members are all of the same view and of the same heart, that is, that everything that is possible should be done to alleviate the suffering and to prevent the further spreading of the disease. As the Chief Secretary has just now observed there are indications that the disease is on the wane.

We shall now adjourn and meet again at 11-30 tomorrow morning.
The Council adjourned at 5-31 P. M.

T. P. RAMASUBBA AIYAR,
Secretary to the Legislative Council.
